

Request for Curriculum Council Action (p. 1 of 2)

TO: Associate Dean of Curricular and Faculty Development, Mellon Center

DATE SUBMITTED: _____

(Please submit 1 double-sided copy of your proposal)

FROM: (Name) _____ (Department) _____

Email address: _____

1 **WRITTEN RATIONALES:** Attach a written rationale, following the guidelines found in the *Curriculum Council Handbook*, page 5, at www.iwu.edu/melloncenter/cc2017-18handbook.pdf. Please note that CC will not evaluate incomplete proposals. To expedite consideration of your submission, you must read and follow the guidelines carefully.

2. Proposed Action (Please check all that apply):

	Title	Number	Units
<input type="checkbox"/> New Course	_____	/	/
<input type="checkbox"/> Gen Ed for Existing Course	_____	/	/
<input type="checkbox"/> Deletion of Major/Minor/	_____		
<input type="checkbox"/> Concentration	_____		
<input type="checkbox"/> Change title from	_____	/	/
to	_____	/	/
<input type="checkbox"/> Change number from	_____	/	/
to	_____	/	/
<input type="checkbox"/> Change prerequisites from	_____	/	/
to	_____	/	/
<input type="checkbox"/> May Term Course	_____	/	/
<input type="checkbox"/> New Major/Minor	_____		
<input type="checkbox"/> Revised Major/Minor/ Concentration	_____		
<input type="checkbox"/> Other (please specify)	_____	/	/

3a. If you are requesting General Education unit credit, please check the category:

- | | | |
|---|---|--|
| <input type="checkbox"/> Analysis of Values | <input type="checkbox"/> Gateway Colloquium (see 9b. below) | <input type="checkbox"/> Life Science Lab |
| <input type="checkbox"/> The Arts | <input type="checkbox"/> Intellectual Traditions | <input type="checkbox"/> Physical Science Issues |
| <input type="checkbox"/> Contemporary Social Institutions | <input type="checkbox"/> Literature | <input type="checkbox"/> Physical Science Lab |
| <input type="checkbox"/> Cultural and Historical Change | <input type="checkbox"/> Second Language | <input type="checkbox"/> Physical Education |
| <input type="checkbox"/> Formal Reasoning | <input type="checkbox"/> Life Science Issues | <input type="checkbox"/> Fitness |

3b. Please check the flag(s), if any, you are seeking:

- Writing Intensive Global Diversity U.S. Diversity

3c. Does this course already carry General Education credit? Yes No

If yes, which category/flag? _____

Will the existing category/flag remain? Yes No

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3d. In what way will you assess how this course has met the goals of the Gen Ed category and/or flag(s) for which you are applying?

Use the Gen Ed Student Survey (Administered by the Registrar's Office)

Use a different tool/method (please explain) _____

4. Please insert here the proposed catalog course description. Course descriptions should be limited to no more than 50 words. The description must include (a) title; (b) prerequisites; (c) General Education category; and (d) when offered, although those four items do not count against the 50-word limit.

5. Please list any prerequisites: _____

6. When will this course first be offered? *(cannot be current or past term)* _____

7. Please indicate how often course is offered. *Check only the single item that best describes this course. Because these are the only intervals used in the University Catalog, please do not edit or alter the list to fit a particular course. For example, if your course is offered every third year—an interval that does not appear in the Catalog—you might choose "Offered as needed" or "Offered occasionally" instead. Courses that cannot be offered at least every four years should not be proposed.*

Offered each Semester

Offered Occasionally

Offered in Alternate Years, May Term

Offered each Fall Semester

Offered in Alternate Years

Offered Annually

Offered each Spring Semester

Offered in Alternate Years, Fall Semester

Offered Every Third Semester

Offered each May Term

Offered in Alternate Years, Spring

Offered By Arrangement

Offered each Semester and May Term

Semester

Offered As Needed

8. If your proposal is approved, would you be willing for the Mellon Center to use it as an exemplary submission in the online *Curriculum Council Handbook*? Yes No

9a. Is/are any other department(s) affected in any way by this request (e.g., course is cross-listed, team-taught, required or elective in another major or minor, etc.)?

No Yes - In what way? _____

Signature of the Head(s) of the Affected Department(s), School(s) or Program(s)

9b. If this proposal is for a Gateway course, does it overlap with any existing courses at IWU?

No Yes - In what way? _____

Signature of Existing Course Instructor

10. The Curriculum Council assumes that the faculty members of your department have seen and approved of this request. Please sign below if this assumption is correct:

Signature of Faculty Member Primarily Responsible for This Proposal

Signature of the Head of the Department, School or Program